

INS. CASE OWNER:

CCB /AIG1800 3333, U663

LKK:

IDAC:

Surveyor:

Marius

DOI:

ASSIGNMENT

2/2/18

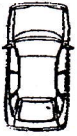
Date / Time :

2/2/18

Registered in Merimen:

2/2/18

Pre-assign / CCU / FTE



Insured Vehicle No. :

SDA 5688E

Name of Insured :

PHUA KIM YUE RUBY

Insured Tel No. :

HP:

Excess Sec II :\$

D.O.A :

2/2/18

Is driver the owner?

(YES / NO)

Nature of Accident :

Claim No. :

041078474956

Policy No. :

700487037

Make / Model :

MAZDA

Place of Accident :

YISHUN CENTRAL THERMAL TO
NORTH POINT BR.

If NO, Driver Name / Age :

PHUA KIM HON

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

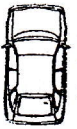
(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

CLQ817M



INSRS:

WSP:

Tel :

Liability :

RMKS:

perkins



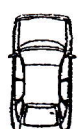
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date / Time		STAGE	DATE / PIC
2/2/18	CLQ817M - P	Non-Reporting ltr (1st):	
1/2	SDA 5688E - P	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
04/03/18	Called old confirm accident detail. old was turning in and he admitted he cut into TP lane. he mention both parties car was just scratches and there was no dent or anything. old mention he have photo of TP vehicle at the point of accident. request old to send us the video and photo. letter sent to OI.	Notification ltr (if non-pickup):	
		Call OI:	700487037
		After call ltr to OI:	CH, P13
		Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	☐
		After call ltr to OI:	☒
		Authorisation To Act:	☒
		Release Voucher:	☒
		Final Repair Bill:	☒
		Car Rental Invoice:	☒
		Towing Invoice:	☐
		LTA / GIA:	☒
		Medical Bill:	☐
		PIR:	☐
		Mandate/Reject Instruction:	☐
		LOD:	☒
		Payment Breakdown Form:	☐
		Post-Repair Photos:	☐
		Others:	☐

PRELIMINARY ADVICE	Date/Time:	Sent By:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: PIP	\$S 2,067.92 (3 days)	Reduction: 63 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 27/04/18	Confirm with: SHARON	Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: (w/acc)	\$S 2,212.67		conflicting version OI COM IN CH 12/2
Loss of Rental (LOR):	\$S - (days)		
Loss of Use (LOU):	\$S 715.00 (\$120 x 5.5 days)	Car rate \$24.95 + loss \$40/dm	
Loss of Income (LOI):	\$S - (\$ x days)		
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	\$S 200		
Medical:	\$S -		
Disbursement:	\$S - (e.g. Tow/ Independent)		
Legal Cost	\$S -		
Total:	\$S 2,929.67	Global Sum \$S: 2,900.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	\$S 2,900.00	Name 1: PE GROUP ENGINEERING & TRADING PTE LTD	
Payee 2: (Strike if N.A.)	\$S -	Name 2: -	
Payee 3: (Strike if N.A.)	\$S -	Name 3: -	